#### LOAN ORIGINATOR APPLICATION INSTRUCTIONS

A Loan Originator Application must be submitted for each person who meets the definition of an originator under the Residential Mortgage Lending Act (RMLA) LSA-R.S. 6:1081 et seq. Originators must be either the owner of the company or an employee. (See attached Policy No. RML-01-03 for definition of employee.) LSA-R.S. 6:1083(6) of the RMLA defines originator as follows: "Originator" means a natural person who is an employee of a mortgage broker or mortgage lender, or person exempt from licensure, who is not acting as a mortgage broker as defined in Paragraph (4) of this Section or as a mortgage lender as defined in Paragraph (5) of this Section who interviews the consumer in connection with the consumer's application for a residential mortgage loan. "Originator" does not include employees of a licensed mortgage broker or mortgage lender, or employees of a person who is exempt from licensure under the provisions of Part II of this Chapter, who perform clerical duties in connection with residential mortgage loan transactions, including but not limited to collecting financial information and other related documents that are part of the application process, ordering verifications of employment, verifications of deposits, requests for mortgage payoffs, and other loan verifications, appraisals, inspections, or engineering reports, or who perform the functions of a loan processor, at the direction of and subject to the supervision of the mortgage broker, mortgage lender, originator, or person exempt from licensure, who is responsible for such direction and supervision.

An Originator may originate loans only for the company whose name appears on his/her license.

ATTA	CHMENTS:					
		ONREFUNDABLE an	d should be made payable to The Office of Financial Institutions)			
	\$100 application fee					
	\$100 fee to add a location not currently registered with this Office.					
	\$50 background processing fee (backg	round check/finge	rprint cards).			
	NOTE: A change in employment du	iring the applicat	on process requires a new application and application fee.			
	<b>PROOF OF TEST RESULTS/EXEMPTION/PROFESSIONAL EDUCATION REQUIREMENT:</b> LSA-R.S. 6:1094(B) of the Residential Mortgage Lending Act requires that each new applicant for licensure shall pass a written examination. Applicants should contact PSI Examinations at 1-800/733-9267 in order to schedule a test. Furnish a certificate verifying that the applicant has received a passing grade on the required test.					
To qua	lify for an exemption from the written ex	xamination, applic	ants must submit the following:			
•	Certified transcripts evidencing a Bachelor's or Master's Degree in business from an accredited college or university. <b>AND.</b> During the 3 years immediately preceding the date of this application, you must submit W-2 or 1099 form(s) and a copy of the applicant's job description(s) signed by his/her previous employer(s) verifying <b>12 months</b> of full-time employment as a mortgage broker or lender, underwriter, processor, or originator.					
•	• OR, During the 3 years immediately preceding the date of this application, you must submit W-2 or 1099 form(s) a copy of the applicant's job description(s) signed by his/her previous employer(s) verifying 24 months of full-time employment as a mortgage broker or lender, underwriter, processor, or originator.					
	Applicants qualifying for exemption from the written examination MUST complete 10 hours of Professiona Education from an approved provider (list attached). Furnish a copy of the Certified Professional Education (CPE certificate verifying that at least10-hours of CPE was completed					
	<b>AUTHORITY TO OBTAIN INFORMATION FROM OUTSIDE SOURCES FORM:</b> This form must be completed, signed by each loan originator applicant, and notarized. Information contained in this document is kept confidential.					
	EMPLOYER CERTIFICATION FORM: This form must be completed, signed by an authorized representative of the company, and notarized.					
	2 ORIGINAL FINGERPRINT CARDS: Two original Form FD 258 fingerprint cards, or equivalent, which can be obtained from your local law enforcement office In addition to your fingerprints, the cards must have your Social Security Number, date of birth, printed name, and signature.					
	<b>EMPLOYMENT/RESIDENCE HISTORY:</b> Complete the attached Employment/Experience History Form and List of Residential Addresses.					
	Signed copy of lease agreement, if application includes a new location.					
	MAIL TO: Office of Financial Institutions P. O. Box 94095 Baton Rouge, LA 70804-9095	or	TO SEND OVERNIGHT: Office of Financial Institutions 8660 United Plaza Blvd – 2 <sup>nd</sup> Fl Baton Rouge, LA 70809			

OFI (08/15/2006)

## LOAN ORIGINATOR APPLICATION

# Residential Mortgage Lending Act (Any changes to this form may result in the application being returned.) TO BE CONSIDERED AN APPLICATION, ALL BLANKS MUST BE COMPLETED AND ALL REQUIRED INFORMATION MUST BE ATTACHED

Complete Legal Name of Originator:	
Phone Number: Business ( )	Fax ( )
2. (a) Name of Employer:	
(b) Municipal Address of Main Office:	
	he originator may originate residential mortgage loans. (Attach additional page if
Principal Location:	Other Locations:
4. Employment and/or Branch Agreement: TY	Yes ☐ No (If yes, attach a signed copy.)
5. Submit a personal resume detailing your work	k experience for the past 10 years and a picture i.d.
	PLOYER CERTIFICATION
	ed by the authorized employer representative)
	of a license (Employee's Name) will be
	does not receive compensation as a 1099
	e company's behalf as a loan originator. I also affirm that to the best of my
knowledge he/she originates ONLY for this com-	npany. I further affirm that he/she is covered under the company's surety bond
or other form of financial responsibility, as requi	
Signed this day of	, 20
(Signature of authorized Company Representative)	(Print Name and Title)
	* * * * * * * * * * * * * * *
STATE OF	
PARISH OR COUNTY OF	
Before me, the undersigned authority, personally	y came and appeared(Company representative)
who first being duly sworn declared under oath th	(Company representative) nat he/she is the of
	(Representative's title)
(Company Name) registration are true and correct to the best of his/ho	_ and that all statements and representations made in the foregoing er knowledge and belief.
Sworn to and subscribed before me on this	day of, 20, at
	(City) State)
(Signature of Notary Public)	(Print name of Notary Public) (Affix Seal)

# **CONFIDENTIAL**

AUTHORITY TO OBTAIN INFOR	MATION FROM OUTSIDE SOURCES					
Name:	Social Security #:					
Home Address, City, State, Zip Code:						
Trome Address, City, State, Zip Code.						
Date of Birth:	Home Telephone No:					
Read the following questions carefully. If the answer is "yes" to any of the questions, attach a full written explanation. Include						
names, dates, court name and address, case number, judgement amounts.						
Have any civil judgments been entered against you during	( ) Yes, attach explanation ( ) No					
the past 10 years?	( ) Ves attack symbologies ( ) No					
Are there any civil proceedings pending against you or civil judgments entered against you which involve fraud or	( ) Yes, attach explanation ( ) No					
dishonesty?						
Have you ever been convicted of, plead guilty to, or entered	( ) Yes, attach explanation ( ) No					
a plea of Nolo Contendere (no contest) to a felony,	. , , , , ,					
including any which may have been expunged, set aside or						
for which you received a first offense pardon?						
Have you ever been convicted of, plead guilty to, or entered	( ) Yes, attach explanation ( ) No					
a plea of Nolo Contendere (no contest) to any misdemeanor involving theft, fraud, or dishonesty, including any which						
may have been expunged, set aside or which you received a						
first offense pardon?						
Have you been the subject of a bankruptcy, assignment for	( ) Yes, attach explanation ( ) No					
the benefit of creditors, receivership, conservatorship, or						
any similar proceeding?						
Have you been refused a license or registration to do	( ) Yes, attach explanation ( ) No					
business under the provisions of a similar law or subject to						
any enforcement proceedings by any State or Federal government agency involving the revocation or suspension						
of any business, fines or penalties?						
Have you been discharged for cause or been requested to	( ) Yes, attach explanation ( ) No					
resign from any employment position?						
	om any financial institution, credit bureau or law enforcement agency					
	, character and fitness in connection with an application for a license or					
registration.  I hereby certify that the information on this form, to the best of	for improvided as is complete and accounts					
I hereby certify that the information on this form, to the best of	of my knowledge, is complete and accurate.					
-	Signature					
SUBSCRIBED BEFORE ME ON THISday of _	, 20					
AT:						
(CITY)	(STATE or COMMONWEALTH)					
(3111)	(STITE OF COMMISSION PRIBATE)					
PRINT NAME OF NOTARY PUBLIC:	SIGNATURE OF NOTARY PUBLIC:					

## Louisiana State Police **Bureau of Criminal Identification and Information** Baton Rouge, Louisiana

\*\*FORMS MUST BE FILLED OUT IN INK AND BE REVIEWED BY SUBMITTING AGENCY/INDIVIDUAL FOR ACCURACY\*\*

#### \*\*\*\*FINGERPRINTS ARE NECESSARY FOR A POSITIVE IDENTIFICATION\*\*\*\* \*\*\*\*PLEASE PRINT\*\*\*\* Robert F. Brian Louisiana Office of Financial Institutions FACILITY OR AGENCY FACILITY OR AGENCY AUTHORIZED REPRESENTATIVE P.O. Box 94095 SIGNATURE OF AUTHORIZED REPRESENTATIVE MAILING ADDRESS 7080<u>4</u> (225) 925-4660 Baton Rouge, Louisiana ZIP CODE CITY STATE FACILITY OR AGENCY PHONE NUMBER **Request For: (pick one only)** □ ADULT DAY CARE □ MEDICAL EXAMINERS □ ADULT RESIDENTIAL □ NURSING HOME □ ALCOHOL AND BEVERAGE COMMISSION □ OCS FOSTER/ADOPTIVE □ ALCOHOL BEVERAGE OUTLET □ OCS PERSONNEL □ AMBULANCE SERVICE **⊠OFFICE OF FINANCIAL INSTITUTIONS** $\sqcap$ CASA □ OFFICE OF PUBLIC HEALTH □ CONCEALED HANDGUNS □ PHARMACY BOARD □ CRIMINAL JUSTICE EMPLOYEE □ POSTSECONDARY EDUCATION □ DAYCARE □ PRACTICAL NURSING □ DENTISTRY BOARD □ PRIVATE ADOPTION □ DEPARTMENT OF LABOR □ PRIVATE INVESTIGATORS □ DEPARTMENT OF PUBLIC SAFETY □ PRIVATE SECURITY □ EMPLOYERS □ PUBLIC HOUSING □ FIREFIGHTERS □ PUBLIC TAG AGENT □ GAMING □ REGISTERED NURSING □ HOME HEALTH AGENCY □ RELIGIOUS ACTIVISTS □ HOSPICE □ RIVERBOAT PILOTS □ IMMIGRATION □ SCHOOL □ INTERMEDIATE CARE FACILITY FOR □ SENATE AND GOVERNMENTAL AFFAIRS MENTALLY RETARDED □ TAXI DRIVERS □ JUVENILE DETENTION CENTER □ USED MOTOR VEHICLE COMMISSION □ DEPARTMENT OF INSURANCE □ VOLUNTEERS WORKING WITH CHILDREN □ MANUFACTURED HOUSING APPLICANTS FULL NAME: \*\*\*\*PRINT - USE INK\*\*\*\* LAST FIRST {INCLUDE MAIDEN NAME & PREVIOUS MARRIED NAMES IF APPLICABLE} APPLICANTS SIGNATURE: \_\_\_\_ APPLICANTS SOCIAL SECURITY # \_ \_ - \_ - \_ \_ DATE OF BIRTH: \_ \_ / \_ \_ / \_ \_ DRIVERS LICENSE # \_\_\_\_\_ & STATE \_\_\_\_ RACE \_\_\_ SEX \_\_\_ TYPE OF OFI LICENSE APPLIED FOR

#### AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION

By my signature above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above.

# **CONFIDENTIAL**

EMPLOYMENT/EXPERIENCE HISTORY FOR THE LAST 10 YRS (Attach additional sheets, if necessary.)								
NAME:								
SOCIAL SECURITY NO.:								
Employer Name and Address	Position/Brief Description of Duties	Start Date Month/Year	End Date Month/Year	Reason for Leaving				
	<u> </u>	I	I					

LIST RESIDENTIAL ADDRESSES FOR THE LAST 10 YRS (Attach additional sheets, if necessary)						
Residential Address	Start Date	End Date				

### STATE OF LOUISIANA OFFICE OF FINANCIAL INSTITUTIONS **BATON ROUGE, LOUISIANA**

August 12, 2003 POLICY NO. RML-01-03

#### EMPLOYEE DEFINED

#### **PURPOSE:**

To clarify who is an employee pursuant to LSA-R.S. 6:1083(6) definition of originator.

#### TO WHOM THIS POLICY APPPLIES:

All natural persons who originate loans for a mortgage broker or a mortgage lender subject to the Residential Mortgage Lending Act ("RMLA").

#### **SPECIFICS:**

Originator is defined, in part, by the RMLA as a natural person who is an employee of a mortgage broker or mortgage lender who is not acting as a mortgage broker or mortgage lender as defined in the RMLA. Employee is not defined in the RMLA; therefore, we look to other sources for guidance, including both the Internal Revenue Service ("IRS") and the Louisiana Department of Labor ("LDL").

The IRS considers the following three factors to determine if a person is an employee:

- 1. <u>Behavioral Control</u> A worker is an employee when the business has the right to direct and control the worker. The company does not have to actually control the way the work is done as long as the company has the right to do so.
- Financial Control An employee would not normally have a significant investment in his work, incur high unreimbursed business expenses, or realize a profit or incur a loss from the business.
- Relationship of the Parties How do the business and worker perceive their relationship?

The LDL defines an employee as an individual who performs services for wages under any written or oral contract and whose wages are subject to unemployment insurance taxes. An individual is **not** an employee if it can be shown that the individual:

- 1. has been and will continue to be free from any control or direction over the performance of such services both under his contract and in fact; and
- such service is either outside the usual course of the business for which such service is performed, or that such service is performed outside of all the places of the enterprise for which such service is performed; and
- 3. such individual is customarily engaged in an independently established trade, occupation, profession, or business.

After taking the above factors into consideration, employee is hereby defined as a natural person who works under the direction and supervision of a mortgage broker or lender and is paid a salary or commission but does not realize a profit or incur a loss from the business. Said person must be under the exclusive control of only one mortgage broker or lender for the purposes of conducting residential mortgage lending activities and whose compensation is subject to withholding of federal and state taxes, unemployment insurance, and social security.

APPROVED BY:

John D. Travis Commissioner

John O. Trovis

8/12/03 Date

# State of Louisiana Office of Financial Institutions

# **List of Continuing Education Providers**

#### LOUISIANA MORTGAGE LENDERS ASSOCIATION

(on-line course and live class provider)
8550 United Plaza Boulevard, Suite 1001
Baton Rouge, LA 70809
Phone: 225-922-4642

Contact: Sarah Phillips
Website: www.lmla.com

### FIRST PROFESSIONAL REAL ESTATE SCHOOL, INC.

(on-line course and live class provider)

Metairie, LA

Phone: 1-800-966-9866 or 504-454-9866

Fax: 504-888-0346 Contact: Roy L. Ponthier, Jr., Ph.D.

Website: www.proeducate.com

#### **DONALDSON EDUCATION SERVICES**

Phone: 1-800-257-2741 or 504-456-1785 Fax: 504-456-1789 Contact: Keith Donaldson

www.donaldsoneducational.com

## MORTGAGE TRAINING INSTITUTE, INC.

6551 South Revere Parkway, Suite 235 Centennial, CO 80111

Phone: 303-758-9037 or 1-877-684-3549

Fax: 303-759-3925 Contact: Jon Exley

E-Mail: <u>jexley@mortgageknowledge.com</u> website: <u>www.mortgageknowledge.com</u>

## BEDFORD GROUP, LLC

713 Heavens Drive, #4 Mandeville, LA 70471 Phone 985- 845-3782 or 1-800-701-0390 Contact: Rod Russell

E-mail: <a href="mailto:rodrussell@bedfordgroup.info">rodrussell@bedfordgroup.info</a>
Website: <a href="http://www.bedfordgroup.info/">http://www.bedfordgroup.info/</a>

# BOB BROOKS SCHOOL OF REAL ESTATE & INSURANCE, INC.

**INSURANCE, INC.** (on-line course and live class provider)

6721 Pecue Lane Baton Rouge, LA 70817

Phone: 225-752-2920 or 1-800-448-5693 Fax: 225-752-6815

Contact: Bob Brooks Website: www.bobbrooksschool.com

#### MORTGAGE RESEARCH, INC.

(on-line course provider)
2959 Cherokee Street, Suite 202
Kennesaw, GA 30144
Phone: 1-888-557-6770

Contact: Dan G. Johnson or Jerry Lee Kelly Website: <a href="https://www.mortgage-education.com">www.mortgage-education.com</a>

#### **ADVANCED EDUCATION SYSTEMS**

(on-line course provider)
Executive Plaza 3, Suite 1001
11350 McCormick Road
Hunt Valley, MD 21031
Phone: 1-877-878-3600

Contact: Christopher D. Nickerson Website: <a href="www.TrainingPro.com">www.TrainingPro.com</a>

### **FINANCIAL STRATEGIES**

690 Pro Med Lane Carmel, IN 46032 Phone: 317-566-0425 or 1-866-411-9752

Fax: 317-566-0601 Contact: Don Huntzinger Website: <a href="https://www.mymortgagetrainer.com">www.mymortgagetrainer.com</a>

#### WEB TAUGHT

(online and live class provider)
4640 South Carrolton, Suite 2B-204
New Orleans, LA 70119
Phone: 504-482-0109 or 1-866-482-0109

Contact: Rudy Schmidt
Website: www.executaught.com

#### MORTGAGE BANKERS ASSOCIATION

(online class provider) 1919 Pennsylvania Ave, NW Washington, DC 20006 Phone: 202-557-2763 Fax: 202-721-0166

Contact: Jennifer Ridings, BCA Website: www.campusmba.org

#### **DELTA TITLE CORPORATION**

3601 North I-10 Service Road W Metairie, LA 70002 Phone: 504-862-9300 Fax: 504-862-9302

Contact: Jacqueline Gamble Email: jgamble@deltatitlecorp.com Website: www.deltatitlecorp.com

## UNITED GUARANTY RESIDENTIAL INSURANCE COMPANY

(live class setting)
P.O. Box 21367
Greensboro, NC 27420-1367
Phone: 336-373-0232 or 1-800-334-8966
Contact Person: Chrissie S. Davis

#### FRANKLIN COLLEGE

201 Evans Road, Suite 400, Building 4 New Orleans, LA 70123 Phone: 504-734-1000 Fax: 504-734-1029 Contact Person: Mrs. Mary Franklin

Website: www.FranklinCollegeCR.com

# BURK BAKER SCHOOL OF REAL ESTATE & APPRAISING

2834 South Sherwood Forest Boulevard, Suite B-9 Baton Rouge, LA 70816 Phone: 225-293-6000 or 1-800-222-3295 Fax: 225-291-7582

E-Mail: <u>burk@burkbaker.com</u> Website: <u>www.burkbaker.com</u>

## NATIONAL MORTGAGE BROKER ACADEMY OF AMERICA

3352 North Shore Acres Monticello, IN 47960 Phone: 1-888-800-4599 Fax: 574-583-2997 Contact: Ted Fletcher